

IAP20 Rec'd PCT/PTO 20 DEC 2005

Application No. (if known): Not Yet Assigned

Attorney Docket No.: HO-P03263US0

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. ER 393629647 US in an envelope addressed to:

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

on December 20, 2005
Date



Signature

Allen E. White, Ph.D.

Typed or printed name of person signing Certificate

55,727

Registration Number, if applicable

(713) 651-8464

Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Transmittal Letter to the United States Designated-Elected Office (3 pages)
Fee Transmittal (1 page)
Copy of PCT/JP2004/008521
International Search Report
Specification (25 pages); (Figures – 4 pages)
Preliminary Amendment (4 pages)
Declaration (2 pages)
Application Data Sheet (6 pages)
Recordation Form Cover Sheet (2 pages)
Assignment (4 pages)
Return Postcard
Check in the amount of \$1,000.00

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PTO/SB/17 (12-04v2)

Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005		Complete if Known Application Number 10/561665 Filing Date Concurrently Herewith First Named Inventor Kunio Awazu Examiner Name Not Yet Assigned Art Unit N/A Attorney Docket No. HO-P03263US0	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT (\$) 1,000.00			

METHOD OF PAYMENT (check all that apply)

☒ Check
 ☐ Credit Card
 ☐ Money Order
 ☐ None
 ☐ Other (please identify): _____

☐ Deposit Account
 Deposit Account Number: **06-2375**
 Deposit Account Name: **Fulbright & Jaworski L.L.P.**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below
 ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17
 ☒ Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	1,000.00
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims - 20 = _____ x _____ = _____ Fee Paid (\$)
Indep. Claims - 3 = _____ x _____ = _____ Fee Paid (\$)

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
5	- 100 =	/50	(round up to a whole number) x	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): _____ Fees Paid (\$)

SUBMITTED BY			
Signature	<i>Allen E. White</i>	Registration No. (Attorney/Agent)	55,727
Name (Print/Type)	Allen E. White, Ph.D.	Telephone	(713) 651-8464
		Date	December 20, 2005

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL LETTER TO THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US) CONCERNING A SUBMISSION UNDER 35 U.S.C. 371		ATTORNEY'S DOCKET NUMBER HO-P03263US0
INTERNATIONAL APPLICATION NO. PCT/JP2004/008521		U.S. APPLICATION NO. (if known see 37 CFR 1.5) 10/561665
INTERNATIONAL FILING DATE 06/17/04		PRIORITY DATE CLAIMED 06/20/03
TITLE OF INVENTION CELL MICROCHIP		
APPLICANT(S) FOR DO/EO/US Kunio Awazu et al.		
Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:		
1. <input checked="" type="checkbox"/> This is a FIRST submission of items concerning a submission under 35 U.S.C. 371.		
2. <input type="checkbox"/> This is a SECOND or SUBSEQUENT submission of items concerning a submission under 35 U.S.C. 371.		
3. <input checked="" type="checkbox"/> This is an express request to begin national examination procedures (35 U.S.C. 371(f)). The submission must include items (5), (6), (9) and (21) indicated below.		
4. <input type="checkbox"/> The US has been elected (Article 31).		
5. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371 (c)(2))		
a. <input checked="" type="checkbox"/> is attached hereto (required only if not communicated by the International Bureau).		
b. <input type="checkbox"/> has been communicated by the International Bureau.		
c. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US).		
6. <input checked="" type="checkbox"/> An English language translation of the International Application as filed (35 U.S.C. 371(c)(2)).		
a. <input checked="" type="checkbox"/> is attached hereto.		
b. <input type="checkbox"/> has been previously submitted under 35 U.S.C. 154(d)(4).		
7. <input type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371(c)(3))		
a. <input type="checkbox"/> are attached hereto (required only if not communicated by the International Bureau).		
b. <input type="checkbox"/> have been communicated by the International Bureau.		
c. <input type="checkbox"/> have not been made; however, the time limit for making such amendments has NOT expired.		
d. <input type="checkbox"/> have not been made and will not be made.		
8. <input type="checkbox"/> An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371(c)(3)).		
9. <input checked="" type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371(c)(4)).		
10. <input type="checkbox"/> An English language translation of the annexes of the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)).		
Items 11 to 20 below concern document(s) or information included:		
11. <input type="checkbox"/> An Information Disclosure Statement under 37 CFR 1.97 and 1.98.		
12. <input checked="" type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included.		
13. <input checked="" type="checkbox"/> A preliminary amendment.		
14. <input checked="" type="checkbox"/> An Application Data Sheet under 37 CFR 1.76.		
15. <input checked="" type="checkbox"/> A substitute specification.		
16. <input type="checkbox"/> A power of attorney and/or change of address letter.		
17. <input type="checkbox"/> A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 37 CFR 1.821 – 1.825.		
18. <input type="checkbox"/> A second copy of the published International Application under 35 U.S.C. 154(d)(4).		
19. <input type="checkbox"/> A second copy of the English language translation of the international application under 35 U.S.C. 154(d)(4).		

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

U.S. APPLICATION NO. 10/561665 (Unknown See 37 CFR 1.5)	INTERNATIONAL APPLICATION NO. PCT/JP2004/008521	ATTORNEY'S DOCKET NUMBER HO-P03263US0																
20. <input checked="" type="checkbox"/> Other items or information: Return Receipt Postcard																		
The following fees have been submitted																		
21. <input checked="" type="checkbox"/> Basic national fee (37 CFR 1.492(a))..... \$300	CALCULATIONS \$ 300.00	PTO USE ONLY																
22. <input checked="" type="checkbox"/> Examination fee (37 CFR 1.492(c)) If the written opinion prepared by ISA/US or the international preliminary examination report prepared by IPEA/US indicates all claims satisfy provisions of PCT Article 33(1)-(4)..... \$0 All other situations \$200	\$ 200.00																	
23. <input checked="" type="checkbox"/> Search fee (37 CFR 1.492(b)) If the written opinion of the ISA/US or the international preliminary examination report prepared by IPEA/US indicates all claims satisfy provisions of PCT Article 33(1)-(4) \$0 Search fee (37 CFR 1.445(a)(2)) has been paid on the international application to the USPTO as an International Searching Authority \$100 International Search Report prepared by an ISA other than the US and provided to the Office or previously communicated to the US by the IB..... \$400 All other situations..... \$500	\$ 500.00																	
TOTAL OF 21, 22 and 23 =	\$ 1,000.00																	
<input type="checkbox"/> Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing in compliance with 37 CFR 1.821(c) or (e) or computer program listing in an electronic medium) (37 CFR 1.492(j)). The fee is \$250 for each additional 50 sheets of paper or fraction thereof.																		
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 15%;">Total Sheets</th> <th style="width: 15%;">Extra Sheets</th> <th style="width: 40%;">Number of each additional 50 or fraction thereof (round up to a whole number)</th> <th style="width: 30%;">RATE</th> </tr> <tr> <td>- 100 =</td> <td>/50 =</td> <td></td> <td>x \$250.00</td> </tr> </table>	Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof (round up to a whole number)	RATE	- 100 =	/50 =		x \$250.00	\$									
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof (round up to a whole number)	RATE															
- 100 =	/50 =		x \$250.00															
Surcharge of \$130 for furnishing any of the search fee, examination fee, or the oath or declaration after the date of commencement of the national stage (37 CFR 1.492(h)).																		
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 20%;">CLAIMS</th> <th style="width: 20%;">NUMBER FILED</th> <th style="width: 20%;">NUMBER EXTRA</th> <th style="width: 40%;">RATE</th> </tr> <tr> <td>Total claims</td> <td>- 20 =</td> <td></td> <td>x</td> </tr> <tr> <td>Independent claims</td> <td>- 3 =</td> <td></td> <td>x</td> </tr> <tr> <td colspan="3">MULTIPLE DEPENDENT CLAIM(S) (if applicable)</td> <td>+</td> </tr> </table>	CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE	Total claims	- 20 =		x	Independent claims	- 3 =		x	MULTIPLE DEPENDENT CLAIM(S) (if applicable)			+	\$	
CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE															
Total claims	- 20 =		x															
Independent claims	- 3 =		x															
MULTIPLE DEPENDENT CLAIM(S) (if applicable)			+															
TOTAL OF ABOVE CALCULATIONS =																		
\$ 1,000.00																		
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Fees above are reduced by 1/2.																		
SUBTOTAL =																		
\$ 1,000.00																		
Processing fee of \$130.00 for furnishing the English translation later than 30 months from the earliest claimed priority date (37 CFR 1.492(i)).																		
\$																		
TOTAL NATIONAL FEE =																		
\$ 1,000.00																		
Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property																		
+																		
TOTAL FEES ENCLOSED =																		
\$ 1,000.00																		
		Amount to be refunded: \$																
		Amount to be charged \$																

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- a. ☒ A check in the amount of \$ 1,000.00 to cover the above fees is enclosed.
- b. ☐ Please charge my Deposit Account No. _____ in the amount of \$ _____ to cover the above fees.
A duplicate copy of this sheet is enclosed.
- c. ☒ The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 06-2375. A duplicate copy of this sheet is enclosed.
- d. ☐ Fees are to be charged to a credit card. **WARNING:** Information on this form may become public. **Credit card information should not be included on this form.** Provide credit card information and authorization on PTO-2038

NOTE: Where an appropriate time limit under 37 CFR 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the International Application to pending status.

SEND ALL CORRESPONDENCE TO:

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1301 McKinney, Suite 5100
Houston, Texas 77010-3095
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SIGNATURE

Allen E. White, Ph.D.
NAME

CUSTOMER NUMBER:

55,727
REGISTRATION NUMBER